

## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

FILED

OF APR 22 PM 12: 19

CARRESCA SABAUGH
MACONU COUNTY CLERK
MT. OLEMERS, HICHIGAN

### BALLOT QUESTION COMMITTEE COVER PAGE

	FOR OFFICIAL USE (	ONLY
Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.	l Mo	12005 To 04/17/2005 Day Year Mo Day Year
1. Committee I.D. Number	Committee's Mailing Address	
67113-50	23886 Fenton	
2. Committee Name	Clinton Township,	MI 48176-1914
L'Anse Creuse Citizens Committee		8-32 84 ne committee mailing address on the Statement
Treasurer's Name and Residential Address	ride	
Donald E. deBeaucla 23886 Fenton Clinton Township, MI A Area Code and Phone 586 468-3284	8036-2914	
6. Treasurer's Business Address	7. Designated Record Keeper's Name and (If the committee has a Designated R	d Malling Address ecord Keeper)
Same as item 5		
Some of frem 3		i i
Area Code and Phone ( )	Area Code and Phone ( )	
8. TYPE OF STATEMENT:	86. ANNUAL STÄTEMENT	8e. DAMENDMENT TO CAMPAIGN STATEMENT
8a. PRE- ELECTION	( Coverage Year)	!
		(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)
QR	8d. QUALIFICATION	
8b. POST- ELECTION	OR	
		8f. U DISSOLUTION OF COMMITTEE
Pre-Election or Post-Election Statement relates to:	☐ NON-QUALIFICATION STATEMENT	Effective Date of Dissolution
☐ PRIMARY ☐ GENERAL	(Required of State-wide Ballot Question	Ellective Date of Dissolution
_	Committees Only)	Month Day Year
SCHOOL SPECIAL :	• P	
		By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summery Page.
Date of Election:	Date of Qualification or Non-Qualification:	including late filing fees. Note: The disposition
Month Day Year		4B and the Summary Page.
	Month Day Year	
	· · · · · · · · · · · · · · · · · · ·	
A committee that does not have a Reporting Waiver must file	all required Campaign Statements. The Cam	paign Statements must include all applicable
A committee that does not have a Reporting Walver must file Schedules. Direct contributions, in-kind contributions, loans, if any of the information listed in items 4, 5, 6, or 7 has chang amendment to the Statement of Organization should accomp	ed since the information was shown on the co	mmittee's Statement of Organization, an
amendment to the Statement of Organization should accomp before the filing deadline of a required campaign statement	any this Campaign Statement. If a request to int, that campaign statement can not be wa	r a Reporting Waiver is not received on or     ived.
The second secon	•	
Vertification: I certify that all reasonable diligence was used my knowledge and belief the contents are true, accurate	in the preparation of this statement and attack	ned schedules (if any) and to the best of
my Mowledge and belief the contents are true, accurate	and complete.	
Donald E. de Beauclait	Normala inte	Buch_
Current Treasurer or Designated Record Keeper	Win D. weg	Date 04/22/2005
Year Type or Print Name	Signature	Month Day



#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

## SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name 4 Anse Creuse Citizens' Committee

A		
RECEIPTS	Column I This Period	Column II
3. Itemized Contributions(Schedule 4A, Column 6)	(3.) \$ 3575.00	Cumulative for Election Cycle (18.) \$ 4575.00
4. Other Receipts (Schedule 4A-1, Column 6)	1166	2010
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS	(4.) \$ 74,04 (5.) \$ 3589.64	(19.)\$ 38.70
(Add Line 3 c + Line 4)	(5.) \$	(20.)\$
IN-KIND CONTRIBUTIONS	en e	100
6. Itemized In-Kind Contributions	(6.) \$ 2456,36	(21.)\$ 2478.90
EXPENDITURES	마다 하는 사람들이 되었다. 그 전 1950년 전 12년 1일 - 1일 -	The same of the sa
7. Expenditures	general de Maria	$\int_{\mathbb{R}^{n}}$
a. Itemized Direct Expenditures ( Schedule 4B, Column 7)	(7a.) \$	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(7b.) \$	A CONTRACTOR OF THE STATE OF TH
c. In-Kind Expenditures - Purchase of Goods or Services		
(Schedule 4B-2, Column 7)	(7c.) \$	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(7d.) \$	The second of th
8. Subtotal of Expenditures	(8.) \$	(22.)\$
Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$	(23.) \$
10. TOTAL EXPENDITURES (Add Line 8 + Line 9)	(10.) \$	(24.)\$
IN-KIND EXPENDITURES		
11. Total In-Kind Expenditures-Endorsements, Donations or	-1-	
Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$	(25.) \$
DEBTS AND OBLIGATIONS	(*) 2004 :	
12. Debts and Obligations		
a. Owed by the Committee (Schedule 4E)	(12a.)\$	
b. Owed to the Committee (Schedule 4E)	(12b.) \$	
BALANCE STATEMENT		
13. Ending Balance of last report filed	278785	
(Enter zero if no previous reports have been filed.)	(13.)\$	
Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(13.)\$ 2787.85 (14.)+ 3589.64	
15. SUBTOTAL Add lines 13 and 14	(15.) = 6377,53	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.)	
17. ENDING BALANCE	(17)5 6377,53	
(Subtract line 16 from line 15)	(17.)\$	

<sup>\*</sup>If your ending balance is negative, please recheck your math.



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67/13-50
2. Committee Name L'Anse Creuse Citizens' Committee

Please enter contribute middle initial.	or⊨s name and ad	dress. If contribution is from an individ	lual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
		4. Date of Receipt <u>01/0</u> 74 F.  75 E.  75 P.  76 P.  77 P.  78	4/05	\$100,00	\$100.00
5. If over \$100,00 cur	nulative, please t			O TO	The state of the state of
Occupation  Business Address  Type of Contribution:	Direct	Employer Loan from a person	☐Fund Raiser	***	and the second of the second o
5. If over \$100.00 cum	<i>n Towns</i> nulative, please p	hip, MI 48036 rovide:	S/OS	\$100.00	\$ 100.00
3. Contribution # 3 Name: Address: 5. If over \$100.00 curr Occupation Business Address Type of Contribution:	nulative, please p	y J. Sley Drive	S/05 □ Fund Raiser	\$100.00	\$ 100.00
3. Contribution # 4	, Anita. Thirty 12, Mi	4. Date of Receipt 01/0.  5. 1-three Mile Roz  48005  rovide: _Employer	5/05  DFund Raiser	\$100.00	#100.00
	5 W 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Page Subtotal)		

Grand Total of All Schedules 4A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page

Page 1 of 8



### **ITEMIZED CONTRIBUTIONS** SCHEDULE 4A LOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50

2. Committee Name L'April Creuse Citizens' Committee

BALLOT QUESTIO	IA COMMITTIEE	- 18 A 18		
Please enter contributor=s name and ad middle initial.	dress. If contribution is from an individu	ial, enter last name, first name	o, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #5 Name: Nelson, Kare 53/00 West Address: Asserbfield, 5. If over \$100.00 cumulative, please		<u>5/05</u>	\$100.00	\$100.00
Occupation	Employer		Q ·	
Business Address		<del></del>		
Type of Contribution:	Loan from a person	Fund Raiser	3	
3. Contribution #6 Name: O'Hara, Sal Address: Rochester H	4. Date of Receipt 01/05 ra Kathryn igen Ct. MI 18309	105	thing so	\$100.00
5. If over \$100.00 cumulative, please	provide:		700.55	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Occupation	Employer			
Business Address				
Type of Contribution: A Direct	Loan from a person	☐ Fund Raiser		
3. Contribution #7 Name: Pellerin Dir 13607 Sikent Address: Shelby Towner	4. Date of Receipt Off OS Inne M. Woods Dr. N.D., M.J. 48315-4.	1	\$100,00	\$100.00
5. If over \$100.00 cumulative, please p		•		
Occupation	_Employer			•
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser	1 1	
3. Contribution #8  Name: Poless, Bev. Address: Macomb, M.  5. If over \$100.00 cumulative, please p	148044	<b>7/05</b>	\$/00.00	\$100.00
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser	# Jan	•
		Page Subtotal) of All Schedules 4A st page of Schedule)	400.00	<u></u>



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67/13-50

2. Committee Name L'Anse Creuse C'agens' Committee

Please enter contributor=s name and a middle initial.	ddress. If contribution is from an indivi	dual, enter last name, first name	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #9 Name: Rabenburg Address: Stepling fle 5. If over \$100.00 cumulative, please	ights, MI 48310		\$100,00	
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser	*	
3. Contribution #10 Name: Fadon - Substitution   A172 Larks Address: Shelby Towns 5. If over \$100.00 purplicative places	pich Nancy but Drive hip, MI 48315	<u>18/06</u>	\$100.00	\$100,00
a. Il over vivo.do cumulative, piease	provide:			•
Occupation	Employer			
Business Address				A Company
Type of Continuation. 25 Direct	Loan from a person	Fund Raiser		
3. Contribution #	4. Date of Receipt 01/0	6/05		
Name: 29544 Derro	it St.			
Address: Harrison Tu	b., M/ 48045		\$ 125.00	\$125.00
5 If over \$100.00 cumulative please portion	provide: South Employed Mise Creuse	Public Schools		
Business Address <u>34641 Ja</u>	efferson Ave. Hor	rison Tup., ML		in the second se
Type of Contribution: Direct	☐ Loan from a person	☐ Fund Raiser		
3. Contribution #12 Name: Holbert, Laur	4. Date of Receipt 01/08	/05		
SADOL Brooke	<i>આ</i>			
Address: St. Clar Shore			\$100.00	#100.00
. If over \$100.00 cumulative, please p	rovide:			
occupation	Employer			
usiness Address		<del> </del>		
ype of Contribution: Direct	Loan from a person	☐Fund Raiser	1000	
		Page Subtotal) If of All Schedules 4A	425.	



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67/13-50

2. Committee Name L'Anse Creuse Cilizens' Committee

BALLOT QUESTIC	IN COMMITTEE			
Please enter contributor=s name and a middle initial.	·		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #/3 Name: 36/70 Lineo Address: New Baltimo  5. If over \$100.00 cumulative, please Occupation	4. Date of Receipt 01/0  1. St.  1. St.  1. 48047  1. provide:  Employer	<u>8/65.</u>	\$100.00	\$ 100.00
Business Address				The second secon
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
3. Contribution #14 Name: Black, Line Address: Sterling He	4. Date of Receipt 01/1 13 A, 18 A,	1/05	\$100.00	\$100.00
If over \$100.00 cumulative, please       Occupation	·		1 (1881) 1992 12 13 13 10 10 10 10 10 10 10 10 10 10 10 10 10 1	
Occupation  Business Address	Employer			
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		the second second
3. Contribution #15 Name: Stats Pame 56395 Bates Address: 16344 State	13 Poate of Receipt 07/1. Rd. MI 48051	1/05		
5. If over \$100.00 cumulative, please p	provide:		\$100.00	100.00
Occupation	Employer	e (jamen jamen jamen Jamen jamen ja		
Business Address				
Type of Contribution: ADirect	Loan from a person	☐ Fund Raiser		
3. Contribution #16 Name: Ri330, Annet Address: 38560 Hartus Address: 38560 Hartus 5. If over \$100.00 cumulative, please p	te Minel Drive No. 1, 12 12 12 12 12 12 12 12 12 12 12 12 12	<i>405</i>	B100.00	\$100.00
Occupation	Employer			
Business Address				45.
Type of Contribution: Direct	Loan from a person	Fund Raiser	#	
	Grand Total	Page Subtotal) of All Schedules 4A ast page of Schedule)	400,00	



### ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>67/13-50</u>
2. Committee Name <u>L'Anse Creuse Citizens' Committee</u>

middle initial.	address. If contribution is from an individue		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #17 Name: Fanning, L. Address: Clinton Town	4. Date of Receipt 01/18 ou Ann f Edward Drive ship, MI 48038-1	716	\$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, pleas	e provide:		700.	
Occupation	Employer			the second second
Business Address				** :
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser	* 4 8	
3. Contribution # 18	4. Date of Receipt 01/12	9/05		
Name: Inwin, Miche	lle Rene			
Name: / Miche Address: Plinton Taus	nski nskiþ, M1 48038			A
5. If over \$100.00 cumulative, please			\$100,00	\$100.00
	Employer	•		
Business Address				
Type of Contribution: X Direct	☐ Loan from a person	☐ Fund Raiser		erus v Skalenska
3. Contribution #19	4. Date of Receipt 01/13	9/05		Sales Sales
· · · · · · · · · · · · · · · · · · ·	Ly M. n	**************************************		
Address: 2/236 Bris	ly M. Tose Dr. Inship, MI 48044		\$ 10000	\$100.00
5. If over \$100.00 cumulative, please	provide:		-100.	<i>B</i> /00.00
Occupation	Employer			
Business Address	Eniployer			
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
	<del>and a second of the second of</del>			
3. Contribution #20 Strick ler	4. Date of Receipt 01/19	700	1	
Name: Strickler, 341 E. Meld	rum Circle			411000
Address: St. Clair, N	11 48079-1005		100.00	\$100.00
5. If over \$100.00 cumulative, please				
Occupation	Employer			
Business Address		·		
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser	\$10-	
		Page Subtotal) f All Schedules 4A page of Schedule)	400.00	



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number <u>67113-50</u>
2. Committee Name <u>L'Anse Creuse Citizens' Committee</u>

BALLOT QUESTIC	ON COMMITTEE			
middle initial.	ddress. If contribution is from an individu		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #2/ Name: Wunderlich, 6/66 River Address: Troy, M.J. 4  5. If over \$100.00 cumulative, please	4. Date of Receipt 01/12 Keith D. Ton Drive 8098-1878 provide:	9/05	<b>B</b> 100.00	\$100.00
Occupation	Employer		9	
	:			
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser	***************************************	
3. Contribution #22 Name: Hobe, Get 31 35990 Prat Address: Membrie, Mi	4. Date of Receipt 01/2 1 Rd. 1 48041-4687			\$100.00
5. If over \$100.00 cumulative, please			100.00	3700.
Occupation	Employer			
Business Address				•
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
3. Contribution # ST Name: # State   Electrical State   State	4. Date of Receipt <u>01/2</u> leen M. om Drive 6., MI 48045-170		\$150.00	\$ 150.00
5 if over \$100.00 cumulative, please	provide:  mession / School  Employs CANSE Creuse P		r Haragara (Artista)	
Occupation	Employs CANSE Creuse P	Micsenools		
Business Address 472,60 Sty	corbash Risd, Chesterick	Tup, M 148047		
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
3. Contribution # 2	4. Date of Receipt	25/05		
Name: Wrona, Wayne	R. 70.1	<b></b>	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e <sup>vert</sup> er e
Name: Wrond, Wayne 39067 Barog Address: Clinton Towns	ne 31 vo. np, mi 48038		BIANDO	\$100.00
5. If over \$100.00 cumulative, please	•		100.	
Occupation	Employer	·		
Business Address	. :	—; ····		
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser	# 1 -00	9
		Page Subtotal) i of All Schedules 4A ast page of Schedule)	<del>"450;"</del>	

Enter this total on line 3a of Summary Page

Page <u>6</u> of <u>8</u>



### **ITEMIZED CONTRIBUTIONS** SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Cilizens' Committee

DALLUI QUESTI	JN COMMITTEE	100 May 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nga na sang managan ng paggan ng paggan Ng paggan ng paggan	The state of the s
middle initial.	ddress. If contribution is from an individu		ne, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #35 Name: Dettloff, D. 63043   Vy La Address: Washington, 5. If over \$100.00 cumulative, please	4. Date of Receipt <u>02/3</u> <b>37</b>	<u>12/05</u>	\$100.00	\$ 100.00
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #26 Name: Yan Camb, Maddress: 23627 Fent Cunton Tub., 5. If over \$100.00 cumulative, please	4. Date of Receipt 02/0 lichael on 54. MI 48036-2910 provide:	2/05	\$100.00	\$ 100.00
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser	12 Table 1	
3. Contribution #37 Name: Hanner Carol Address: Bighton, M.  5. If over \$100.00 cumulative, please		9/05	\$ 100.00	\$ 100.00
Occupation	Employer			and the second s
Business Address				
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
3. Contribution # R 8  Name: Alsob, Etick Address: Waterford, 16  5. If over \$100.00 cumulative, please Occupation	N/48328	406	\$100.00	\$ 100,00
Business Address				·
Type of Contribution: Direct	Loan from a person	☐Fund Raiser	* 10 - 0	
		Page Subtotal) of All Schedules 4A est page of Schedule)	430,00	



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 67113-50

2. Committee Name L'Anselreuse Citizens' Committee

Please enter contributor=s name and ad middle initial.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 29 Name: Da Via John Address: Harrison Town  5. If over \$100.00 cumulative, please	:	6/05	#100.a	\$100.00
Occupation			e e la	Arrament (Chi
Business Address	CITIPIOY61		<b>1</b>	
Type of Contribution: Direct	Loan from a person	Fund Raiser	· 4 ·	<b>₩</b>
3. Contribution # 0 Name: Mulcahy, Path Name: 14966 Shady Address: Shelby Towns	4. Date of Receipt <u>03/1</u> 1. Lane 1. MI 48315	1/05		
5. If over \$100.00 cumulative, please p	rovide:		\$100,00	\$ 100,00
Occupation	Employer	<u> </u>		
Business Address				
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
3. Contribution # Milage Name: Michigan Educ Address: 3850 Gaf 5. If over \$100.00 cumulative, please p	4. Date of Receipt 03/2 -Ballot Issue Communition Association Wild RJ Suite B	ajos hitter		
5. If over \$100.00 cumulative, please p	71/48038-3427	40 0010	\$500.00	500.00
Occupation	rovide: Dennis Bruck, Employer	V.P. OF P.A.C.		
Business Address		<del> </del>		
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser		
3. Contribution #	4. Date of Receipt			
Name:		· · · · · · · · · · · · · · · · · · ·		
Address:			Taring the said	- A
5. If over \$100.00 cumulative, please pr	ovide:			
Occupation	_Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	☐ Fund Raiser	*	
	Grand Total	Page Subtotal) of All Schedules 4A	100.00	

(Complete on last page of Schedule)



#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

#### ITEMIZED OTHER RECEIPTS SCHEDULE 4A-1 **BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 67113-50
2. Committee Name L'Anse Creuse Citzens' Committee

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt#1 Name: Macomb Schools & 40400 Garfield Address Clinton Townshi	Date of Receipt <u>03/31/200</u> 5 Sovernment Crédit Union Road b, M/ 48038	☐ Loan from a Lending Institution  Interest ☐ Refund\Rebate ☐ Other (Specify)	\$ 14.64
	☐Fund Raiser		
Receipt #2 Name: Address:	Date of Receipt	Loan from a Lending Institution Interest Refund\Rebate. Other (Specify)	
Receipt #3 Name:  Address:	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund\Rebate ☐ Other (Specify)	<b>V</b> 4
Receipt #4 Name: Address:	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund\Rebate ☐ Other (Specify)	
Receipt #5 Name: Address:	Oate of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund\Rebate ☐ Other (Specify)	
Receipt #6 Name: Address:	Date of Receipt	☐ Loan from a Lending Institution ☐ Interest ☐ Refund\Rebate ☐ Other (Specify)	
	Grar (Complete	Page Subtotal ad Total of Ali Schedules 4A -1 on last page of Schedule)	14.64

Enter this total on line 4 of Summary Page

Page \_\_\_\_\_ of \_\_\_\_



#### MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

#### ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 67113-50

2. Committee Name L'Anse Creuse Citizens' Committee

	<i>0</i>	· · · · · · · · · · · · · · · · · · ·	
Name and Address from whom received  If contribution is from an individual, please enter last name first.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name and Address:  Denald L. de Seauclair  23886 Fenter  Cinton Tab., #1 #8036-29/4  If over \$100.00 cumulative, please provide:  Occupation  Employer  Business Address  Fund Raiser	4. Loan endorsement or guarantee  Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Cobies  5. DATE OF RECEIPT: 0/21/05  6. VENDOR NAME & ADDRESS:	\$ 5.77	B6.11
Contribution #2 Name and Address:  Same as Centribution #1  If over \$100.00 cumulative, please provide: Occupation Employer Business Address  Fund Raiser	4. Loan endorsement or guarantee  Goods Donated or loaned Services Donated  Goods or Services Purchased by Others  Goods or Services Purchased by Others - LOAN  Description Cobies  5. DATE OF RECEIPT: 61/3//05  6. VENDOR NAME & ADDRESS:  31980 Gratiot Ave.	<b>*</b> -59	\$6.10
Contribution #3 Name and Address;  Darton Malow Company 26500 American Drive 5004ff, etc., M. 48034 If over \$100.00 cumulative, please provide:  Occupation Design Construction Employer Services Business Address  Fund Raiser	4. Loan endorsement or guarantee  Goods Donated or loaned Services Donated  Goods or Services Purchased by Others  Goods or Services Purchased by Others  LOAN  Description  Application  5. DATE OF RECEIPT: 02/18/05  6. VENDOR NAME ADDRESS  Application  6. VENDOR NAME ADDRESS  ADDR	\$ 150,00	# 150.0°
	Page Subtotal	\$ 156.36	

(Complete on last page of Schedule)



## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 67113-50
2. Committee Name L'Anse Creuse Citizens' Committee

- rung Raiser	WH. CEMENS, MI 48043	\$2300.00	
☐ Fund Raiser	EVENDOR NAME ADDRES POSTS/ Service		
Employer Business Addréss	5. DATE OF RECEIPT: 04/04/05	\$2000.00	2730.
Occupation	Postage on account Description Description # 450	\$ 00-00	\$ 2450.00
If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Others - LOAN		
#3, #4 and #5	Goods or Services Purchased by Others		. L
Some as Contributions	4. Loan endorsement or guarantee		
Contribution # Name and Address:	1		
☐ Fund Raiser	155 South Main Street NH. Clemens, MI 48043		
	6 VENDOR NAMES ANDRESS 12/ Service 155 South Main Street		
Employer Business Address	5. DATE OF RECEIPT: 04/04/05		
Occupation	Description Standard Mail		•
If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Others - LOAN	\$ 150,00	\$450.00
	Goods or Services Purchased by Others		44
some as contributions  # 3 and # 4	Loan endorsement or guarantee     Goods Donated or loaned    Services Donated		
Contribution S Name and Address:		1.11	
☐ Fund Raiser		٠.	
	6. VENDOR NAME & ADDRESS:		à
Employer Construction  Business Address  Services	5. DATE OF RECEIPT: March, 2005		
Occupation  Design / Construction	Description A hours & 15. Jan 1995  5. DATE OF RECEIPT: March 2005	130.	300.
If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Others - LOAN	\$ 150.00	France
26500 American Drive Southfield. MI 48034	☐ Goods Donated or loaned ☐ Services Donated ☐ Goods or Services Purchased by Others		
Contribution ##Name and Address:	4. Loan endorsement or guarantee	<i>*</i>	
If contribution is from an individual, please enter last name first.	Name & Address of Vendor from whom goods or services were purchased		Cycle (Through date in Item 5)
16 in the state of the first of the state of	Type of In-Kind Contribution (Check applicable box)     Date of Receipt	7. Amount or Fair Market Value	8. Cumulative for Election

Page Subtotal
Grand Total of all Schedules 4-IK
(Complete on last page of Schedule)

\$2300.00 \$2456,36